

New Registration
Renewal
Registration #
(Previous year's number from card)

400 East Military Ave Fremont NE 68025 Phone 402-727-2638 Fax 402-727-2659

www.fremontne.gov

REGISTRATION APPLICATION

BUSINESS NAME (Company y	our registration will be with):	
APPLICANT NAME:		
ADDRESS:		
CITY, STATE, ZIP:		
TELEPHONE NUMBER:		
EMAIL:		
Please select which registrat	ion vou are applvina for:	
Electrical	Plumbing	Mechanical
☐ Master	☐ Master	☐ Master
☐ Journeyman	☐ Journeyman	☐ Journeyman
☐ Apprentice	☐ Apprentice	☐ Apprentice
Steamfitter	Water Condition	ner Forestry
☐ Master	☐ Master	☐ First Class
☐ Journeyman	☐ Journeyman	☐ Second Class
☐ Apprentice		☐ Second Class Spray
☐ Cement Work	☐ Onsite Wastewater Treatment Professional	
☐ Asphalt Work☐ Excavation Work	☐ House Mover	☐ General Construction
I certify that the following st best of my knowledge.	atements in applying for my r	registration card are true and correct to the
Signature		 Date